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Vasyl HULAY

PhD hab. (Political Sciences), PhD (History), Professor, Head of the Department of International Information, Lviv Polytechnic National University, 13/4 Luitneva Street, Lviv, Ukraine, postal code 79022 (gulayvasyl@gmail.com)

ORCID: 0000-0002-7609-7967 **ResearcherID:** 33682283

Volodymyr STARKA

PhD hab. (History), Associate Professor, Associate Professor of History of Ukraine, Archeology and Special Branches of Historical Sciences Ternopil Volodymyr Hnatiuk National Pedagogical University, Ternopil, Ukraine, postal code 46027 (starkal 980@tnpu.edu.ua)

ORCID: 0000-0002-0213-9298 **Researcher ID:** AAB-9856-2020

Василь ГУЛАЙ

доктор політичних наук, професор, кандидат історичних наук, завідувач кафедри міжнародної інформації Національного університету "Львівська політехніка", вул. Лютнева 13/4, м. Львів, 79022, Україна (gulayvasyl@gmail.com)

Володимир СТАРКА

доктор історичних наук, доцент, доцент кафедри історії України, археології та спеціальних галузей історичних наук Тернопільського національного педагогічного університету імені Володимира Гнатюка, вул. Максима Кривоноса, 2, м. Тернопіль, Україна, індекс 46027 (starka1980@tnpu.edu.ua)

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HEALTH CARE SYSTEM TRANSFORMATION OF THE POPULATION OF THE WESTERN REGIONS OF UKRAINE (1939 – 1941): THE SOVIET HISTORIOGRAPHICAL MYTHS AND MODERN INTERPRETATION OF ARCHIVAL SOURCES

Abstract. The purpose of the research is the source historiographical characteristics of the health care system transformation of the population of the western regions of Ukraine at the initial stage of the region's Sovietization (1939 – 1941). The methodology of the research is based on the general principles of the methodology of historical cognition, based on the principles of historicism, objectivity and pluralism and reliance on historical sources and the use of general scientific (analysis, synthesis, induction and deduction, method of analogies) and special historical (genetic, comparative, systemic,

historical periodization, retrospective) methods. The scientific novelty is that for the first time the greater part of valuable archival materials that elucidate little studied issues concerning institutional and procedural changes in the health care system of Western Ukraine in the context of the Soviet administrative model of social policy and Stalin's totalitarian regime in general were introduced into scientific circulation. The Conclusions. Relevant scientific publications and archival documents have been brought into a broader historiographical context due to the definition of the main components of the health care organization system, which provide the previous historical knowledge with the supplement of the outlined issues significantly. In detail there have been elucidated the dominant influence of the party ideologues of Stalin's totalitarian regime on the nature and essence of the radical change in the health care system of the western regions of Ukraine at the first stage of the region's Sovietization (the autumn of 1939 - the summer of 1941). There has been suggested the interpretation of the medical institutions' network growth, their bed stock, medical staff in the process of implementation of the Soviet policy of the health care system organization in the western regions of the Ukrainian Soviet Socialist Republic. Hence, there have been refuted the historiographical myths about the importance of the Communist Party's care and the personal role of the leaders of the Union of the Soviet Socialist Republics and the Ukrainian Soviet Socialist Republic in overcoming the backwardness of the medical sector in the western Ukrainian region of the period under analysis, which was caused by "a heavy national and social oppression of lordly Poland".

Key words: western regions of Ukraine, Sovietization, health care, medical institutions, medical staff, epidemic diseases.

ТРАНСФОРМАЦІЯ СИСТЕМИ ОХОРОНИ ЗДОРОВ'Я НАСЕЛЕННЯ ЗАХІДНИХ ОБЛАСТЕЙ УКРАЇНИ В КОНТЕКСТІ ПОЛІТИКИ РАДЯНІЗАЦІЇ РЕГІОНУ (1939—1941): КРИТИЧНИЙ АНАЛІЗ РАДЯНСЬКОЇ ІСТОРІОГРАФІЇ КРІЗЬ ПРИЗМУ АРХІВНИХ ДОКУМЕНТІВ

Анотація. дослідження джерельно-історіографічна характеристика трансформації системи охорони здоров'я населення західних областей України на початковому етапі радянізації краю (1939—1941). Методологія дослідження базується на загальних засадах методології історичного пізнання, що ґрунтується на принципах історизму, об'єктивності та плюралізму, опори на історичні джерела, використанні загальнонаукових (аналіз, синтез, індукція та дедукція, метод аналогій) і спеціально-історичних (генетичний, порівняльний, системний, історичної періодизації, ретроспективний) методів. Наукова новизна полягає у впровадженні до наукового обігу значної частини цінних архівних матеріалів, що розкривають малодосліджені питання інституційно-процедурних змін системи охорони здоров'я населення Західної України у контексті насадження радянської адміністративної моделі соціальної політики та утвердження сталінського тоталітарного режиму загалом. Висновки. Через визначення основних складових системи організації охорони здоров'я впроваджено у ширший історіографічний контекст відповідні наукові публікації і архівні документи, які істотно доповнюють попередні історичні знання окремих питань окресленої проблематики. Докладно показано домінуючий вплив партійних ідеологем сталінського тоталітарного режиму на представлення характеру й сутності докорінної зміни системи охорони здоров'я населення західних областей України на першому етапі радянізації регіону (осінь 1939 – літо 1941 рр.). Запропоновано власну інтерпретації зростання мережі медичних закладів, їх ліжкового фонду, медичного персоналу в процесі впровадження радянської політики організації системи охорони здоров'я західних областей УРСР.

Ключові слова: західні області України, радянізація, охорона здоров'я, лікувальні заклади, медичний персонал, епідемічні хвороби.

The Problem Statement. Some issues concerning the inhabitants' everyday life in the newly formed western regions of Ukraine at different stages of Sovietization of the region are in the focus of domestic researchers' view Popp, 2021, p. 163; Hordiyenko, 2022, p. 142; Starodubets, 2019, p. 179. At the same time, the health care sphere in the western

Ukrainian region at the beginning of World War II (the so-called entry of the Red Army into the south-eastern voivodships of the Second Commonwealth on September 17, 1939, can be interpreted in the context of World War II in favour of the new rulers – the Stalinist USSR and the Nazi (Hitler's) Germany) remains to be an unexplored important area of life of its inhabitants. It should be mentioned that it is impossible to obtain an adequate representation of the relevant historical period, both in modern scientific public discourse and in the mass historical memory of our contemporaries without a detailed study of not only a legal and institutional procedural component of the Soviet policy of radical change in the medical care system for the population of the newly annexed western regions of the Ukrainian SSR, but the essence and nature changes in living conditions affected by expanding the network of medical institutions personnel for appropriate services (especially in rural areas, taking into account the appropriate nature of the territorial and settlement structure of the western region during the period under analysis), reduction of infant mortality, and limitation of the scale of certain acute infectious diseases.

At the same time, the Soviet historiography theoretical and methodological rudiments should be left behind, interpreting the previous works critically and introducing valuable archival materials into scientific research (Dudnyk, 2022, p. 304) based on modern understanding of the health care system and its components, as in general Ukrainian dimension (Dudnyk & Shaurenko, 2022, p. 304) and regional, comparative and retrospective dimensions (Sahach & Lavrinenko, 2019, pp. 212–214).

The Analysis of Recent Researches and Publications. In 2001 the co-author of this article published the first generalized publication on the health care state of the population of the western regions of Ukraine in the second half of the 40s – 50s of the XXth century (Hulai, 2001, pp. 176–180). However, the author's aim was not to study the institutional and procedural features of health care transformation in Western Ukraine in the process of preparation and inclusion in the USSR as newly formed western regions of the Ukrainian SSR in 1939 – 1940.

The following work: "Drohobych: Historical Essays" could be a vivid and positive example of a thorough archival and bibliographic study of the outlined issues in a subregional dimension (Bohachenko & Romaniak, 2008).

Nevertheless, it is worth analyzing the publications of the last decade, which raised some issues concerning health care in the western regions of Ukraine. First of all, it is vital to refer to a separate section (2.3.3. "The Medical Activities Regulation in Prykarpattia during the Years of 1939 – 1950") of the collective monograph "Public Health Management in Ukraine: Genesis and Development Prospects" (Bilinskyi & Radysh, 2013).

In this context, the following article should be mentioned: "Features of State Regulation of Medical Activities in Prykarpattia in 1939 – 1950" (Radysh & Soroka, 2012a, pp. 12–21), in which in the historical retrospective there were reflected the main issues of public health of the region and there were made conclusions that seem useful for further detailing the outlined issues in subsequent historical research.

The university teachers of the local medical university made their attempt and suggested subregional retrospectives of Ternopil region medical branch transformation (Kadobnyi, Kozak & Labivka, 2016, pp. 15–120). Despite some valuable results of the mentioned above research, in the work there is irritative influence of the Soviet historiography ideology ("As in other regions of Western Ukraine which were part of *lordly* Poland .." – italics are added by us) and the fact that the wide source base of the State Archives of Ternopil region was ignored.

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The article written by Ivano-Frankivsk team of authors stands out against the background, despite the narrow focus of novelty, there is a careful approach to the study of sources and interpretation of the results of Stanislaviv region residents' health care system study in the second half of the 40s – 50s (Skrypnyk etc., 2017, pp. 64–82).

Having chosen a rather narrow source and historiographical section of the study of the history of the medical field of Stanislavshchyna, other authors (Radysh & Soroka, 2012b, pp. 89–94; Soroka, 2013, pp. 137–141) presented valuable information that will be useful for future researchers.

The Purpose of the Research. The purpose of the study is the source historiographical characteristics of the health care system transformation among the population of the western regions of Ukraine at the initial stage of the region's Sovietization (1939 – 1941).

According to the set goal it is necessary to solve the following research tasks:

- to determine the main components of the health care organization system;
- to illustrate the influence of party ideologues on the coverage of the radical changes in the health care system of the population of Western Ukraine at the first stage of the region's Sovietization (the autumn of 1939 the summer of 1941);
- to present a new interpretation concerning the medical institutions' network growth, their bed stock, medical staff in the process of implementing the Soviet policy of the health care system organization of the western regions of the Ukrainian SSR;
- to point out the scarcity of research on the acute epidemic diseases spread issues during the specified period;
 - to suggest the theme for further analysis of the outlined research issues.

The Results of the Research. As a starting point, we should turn to understanding the state of health care primarily by determining the availability of an extensive network of medical institutions, a significant number of qualified medical personnel, who was able to provide a qualitative medical care on time and successful preventive work, and in order to do that it was impossible without an adequate number of appropriate premises for treatment and prevention facilities equipped with appropriate medical equipment and adequate provision of medicines (Hulai, 2001, p. 176).

It is quite obvious that some issues concerning public health in the western regions of the Ukrainian SSR in 1939 – 1941 were the subject of separate publications written by the Soviet authors, which sometimes formed the basis of modern historical publications uncritically, which, in our opinion, not only indicated the superficial level of individual authors contemporaries but through the introduction of modern information and communication technologies of such works in a wider public access may lead to corresponding distortions in the minds of individual consumers of such content, which, in turn, replicate some very obvious ideological postulates among its narrower audience, in fact, distort the historical truth, returning it to the modified narratives of the historical policy of the Russian Federation in the course of a large-scale aggression against independent Ukraine.

In this article, we will try to analyze individual publications of the Soviet period authors critically, both by exposing the dominant party and ideological context and introducing into wide historical use information obtained from the archives of the same Soviet period, which was unpublished.

First of all, even works on medical issues were full of propaganda clichés in line with the dominant communist ideology of that time: "In September of 1939, during the war with Nazi Germany, the Polish government left its state to its own fate...The Soviet Army liberated the long-suffering people of Western Ukraine from the foreign enslavement" (Chemeris, 1961, p. 180).

In no way often justifying the facts of discrimination in the socio-economic policy of the governments of the Second Commonwealth, in particular, in the field of health care of the predominant Ukrainian Volyn, Lviv, Stanislaviv and Tarnopol voivodships, we cannot ignore the scientific thesis as propaganda cliché ("Polish occupiers allocated meager funds for the maintenance of medical facilities") (Garagash'yan & Parashchak, 1972, p. 23). Hence, according to the Soviet authors, in 1935 those allocations amounted to 1113,310 złotyh or 0,95 złotyh per capita (respectively, 83,540 zł came from the state budget, 4,257,222 zł from city self-government budgets and 6,04048 zł from county self-government budgets) (Garagash'yan & Parashchak, 1972, pp. 23–24).

It is obvious that health care system financing in the south-eastern voivodships of interwar Poland was insufficient, according to the corresponding position of official Warsaw concerning the predominantly Ukrainian population of former Eastern Galicia (Halychyna) and Western Volyn, but, at the same time, the basic postulates of the Soviet historiography, such as "The government of bourgeois Poland allocated a meager sum for health care" (Chemerys, 1959, p. 5) should be concretized in reference to relevant sources, because otherwise this amount (0, 14 zł per year per capita) dissonants with other facts sharply, which were found on the pages of the Soviet period papers and could be presented in the above-mentioned paragraph.

I. Ishchenko, another author of that period, did not provide any financial statistics in order to confirm the thesis that "in 1940 Ternopil had the same allocations for health care as the whole lordly Poland" (Ishchenko, 1961, p. 57).

Hence, emphasizing the fact that "Stanislaviv Voivodeship, like all bourgeois Poland, did not have a sufficient number of hospital beds" (Garagash'yan & Parashchak, 1972, p. 22), the Soviet authors referred to the data of 1934, according to which the provision of hospital beds was 0,7 in Stanislaviv Voivodeship of that time (based on 1000 inhabitants) (Garagash'yan & Parashchak, 1972, p. 22).

It should be noted that in the archival materials we also came across a lot of information that should have emphasized the relevant state of the medical sphere on the eve of the inclusion of Western Ukraine in the Ukrainian SSR. Hence, in the materials of Ternopil Regional Executive Committee, we found information that there were only 9 hospitals in 1939 out of 17 povits (counties) of voivodeship of that time, there were only 30 doctors in 1218 villages of Ternopil region, which led to a high mortality (17,4% in 1938) of patients who sought for medical help (SATR, f. R-1833, d. 6, c. 2, p. 11).

The archival sources of the medical institutions' network growth and the increase in the number of hospital beds during the first years of the Soviet regime in the former southeastern voivodeships of the Second Commonwealth were not as impressive as the communist propaganda and the Soviet-era authors stated. For example, it could be confirmed by some archival sources that did not gain wide scientific use yet, in particular, from Fund F. R-312 "Lviv Regional Department of Health" of the State Archives of Lviv region (SALR, f. R-312, d. 1, c. 2, pp. 4, 10v.).

According to the DATO materials, there were 20 hospitals with 939 beds, 19 polyclinics, and 50 outpatient clinics were opened in 13 povits (counties) of the newly formed Ternopil region on December 20, 1939 (SATR, f. R-1833, d. 6, c. 2, p. 11).

It was characteristic of the Soviet historians to concentrate on certain quantitative indicators that did not reveal the essence of the relevant changes. For example, V. Danileichenko emphasized only the fact that in 1940, compared with 1938, the network of outpatient hospitals in Lviv region increased 12,5 times but, at the same time, the provision of hospital beds per 1,000

population increased from 1,86 to 3,5 including in the countryside – 0,17 beds (Danileichenko, 1961, p. 45), taking these figures into account, we can infer that most of the newly opened medical facilities were located in small adapted rooms, especially in rural areas, and that is why, there was no possibility for a significant number of hospital beds.

Consequently, we cannot but point out that the available archival materials contain information on the relevant quantitative changes. For instance, during the period from mid-September of 1939 to the beginning of March of 1940, the number of hospital beds in Stanislaviv region increased from 771 to 1664 (SAIFR, f. P-1, d. 1, c. 7, p. 40).

Summary statistics on the number of hospital beds by type of settlement could be seen in Table 1 (SALR, f. R-312, d. 2, c. 43, pp. 163, 203).

Table 1 The number of hospital beds in medical institutions of all types in the western regions of Ukraine (1940 - 1945)

Region	Urban area	Rural area		
	1940	1945	1940	1945
Volyn	1173	1190	100	312
Drohobych	1776	1476	191	384
Lviv	4375	3828	191	165
Rivne	1240	3828	425	710
Stanislaviv	1991	1015	167	450
Ternopil	1465	1180	441	615
Chernivtsi	1887	2095	220	460

If, on October 17, 1939, there were 8 hospitals, 14 polyclinics (including 3 in rural areas), and 15 medical centers (including 8 in rural areas) in the territory of the future Stanislaviv region of the Ukrainian SSR, on March 1, 1940, there were already 33 hospitals (including 13 in rural areas), 26 polyclinics (3 in rural areas), 49 outpatient clinics (35 in rural areas), and 51 medical centers (41 in rural areas), 13 sanitary and epidemiological stations (1 – in the village) (SAIFR, f. P-1, d. 1, c. 7, p. 40).

The specific terminology and dominance of the quantitative presentation of the work results in the health care of the population in the newly formed western regions of the Ukrainian SSR were particularly eminent and declared at public party events. For example, on January 11, 1941 at the party activists meeting in Stanislaviv region, it was highlighted that there were 78 "hospitals" before the Soviet power establishment in the region, then during the first year of the Soviet rule there were opened 184 "hospitals", 22 maternity hospitals, 491 outpatient clinics and polyclinics (SAIFR, f. P-1, d. 1, c. 116, p. 5). In particular, there were 25 hospitals, 26 polyclinics, 36 outpatient clinics, where 583 doctors worked in Stanislaviv region at the beginning of 1941. It was emphasized that in 1938 there were only 11 medical institutions with 45 doctors (SAIFR, f. P-1, d. 1, c. 116, p. 5).

Furthermore, the emphasis was put on the fact that numerous doctors – natives of Western Ukraine, were actively involved in the work of children's treatment and prevention facilities, (Muhina & Danileichenko, 1961, p. 94) "who were deprived of the opportunity to get a job according to the specialty, while being under the foreign rule, remained unemployed" (Muhina & Danileichenko, 1961, p. 94), however, the authors do not cite any statistics and personalities of the medical personnel.

The fate of those doctors, who were persecuted or physically exterminated by the Soviet repressive and punitive authorities due to their pre-war political position or nationality needs to be studied in detail in this context (Ilnytskyi, 2018, pp. 122–148).

To our mind, the Soviet period authors' statement seems too categorical – "All doctors, who were engaged in private practice and unemployed doctors got jobs in the state medical and preventive institutions that opened" (Garagash'yan & Parashchak, 1972, p. 43).

Without the source reference, T. Burykhin's article provided statistics that had to show significant changes in the provision of medical personnel to the newly formed health care system of the western regions of the Ukrainian SSR in 1940, due to arbitrary comparison of relevant statistics, when instead of the same in Soviet historiography, the calculation of the number of doctors and paramedics per 1000 population, вказаним автором абсолютні числа діляться 10000, the specified absolute numbers are divided by 10000, and thus, the corresponding figures seem more convincing to confirm the propaganda constructs: hence, there were 23 doctors and 46 paramedics in the cities, respectively, and 1,2 doctors and 4,9 paramedics (Burihin, 1961, p. 29).

In addition, while analyzing the Soviet health statistics, certain disparities in the share of involvement in half or even a quarter of the medical rate of the majority of medical workers became apparent. For example, at the end of 1940, 487 treatment and prevention facilities were opened in Stanislaviv region (235 in urban areas and 252 in rural areas), but at the same time, according to other sources, there were 551 doctors and 1,288 paramedics in the region (Garagash'yan & Parashchak, 1972, p. 43).

The party leaders were forced to admit that there was an acute shortage of paramedics in the work of medical institutions. For example, a secondary medical and obstetric school was opened in Stanislaviv, but the work was not put to a proper level by the beginning of March of 1940 (SAIFR, f. P-1, d. 1, c. 7, p. 41).

It is interesting to trace the relationship between the components of the proposed propaganda structure: "Social and national oppression, brutal exploitation of workers, low cultural level and lack of free medical care created a favorable ground for the spread of various infectious diseases, including tuberculosis, which was a chronic epidemic disease in Western Ukraine" (Chemerys, 1959, p. 5).

The party document pointed out that the Soviet authorities paid special attention to the fight against sexually transmitted diseases, "Poland was very notorious for", (SAIFR, f. P-1, d. 1, c. 7, p. 41), but, at the same time, information about these diseases were considered to be a secret in the Union of Soviet Socialist Republics.

Nevertheless, even the Soviet historians could not help but acknowledge that in interwar Poland, "Infectious patients with sexually transmitted diseases received outpatient care partially free of charge" (Garagash'yan & Parashchak, 1972, p. 24).

Taking into account the quantitative indicators of the growth of anti-tuberculosis and venereology dispensaries, points and offices (in 1940 17 skincare establishments were opened in Lviv region, which, in our opinion, taking into account the population of the largest region of Western Ukraine was too small) the above-mentioned V. Danileichenko (Danileichenko, 1961, p. 45) did not indicate the scale of the disease.

During the above-mentioned period, the incidence of tuberculosis remained quite high. Hence, there were 8760 patients registered ill with this disease in Lviv region in 1940, which was 25 patients per 1000 population (SALR, f. R-312, d. 2, c. 3, p. 138). Consequently, a regional anti-tuberculosis dispensary was opened in Drohobych with the Soviet power

establishment in 1939, and on January 3, 1940, tuberculosis hospital with 20-beds was opened there. However, according to modern researchers, the place of operation of those institutions and the names of doctors, who worked there were not established. It is known that P. Yudkevych, an employee of the Ukrainian Research Institute of Tuberculosis. F. Yanovsky (Kyiv) was appointed the chief doctor of the anti-tuberculosis dispensary (Bohachenko & Romaniak, 2008, 186).

In order to compare, let's consider Ternopil region, in April of 1940, among the institutions of the relevant profile there operated 15 tuberculosis dispensaries, 7 venereology dispensaries and 1 trachoma dispensary (SATR, f. P. 1, d. 1, c. 3, p. 55).

In conclusion, it should be mentioned that some issues of transformation of the health care system of Western Ukraine at the first stage (1939 – 1941), which were analyzed in previous Soviet historiography and found a brief reflection in modern publications were supplemented only by a small part of the archival materials of the three archives of the region – SAIFR, SALR and SATR. In our opinion, it allowes us to suggest a broader retrospective, as narrowly specialized issues concerning the history of medicine in Ukraine in the abovementioned period, complement the overall picture of an everyday life of residents of western Ukraine significantly.

The Conclusions and Prospects for Further Research. Hence, the reserch results allow us to draw the following conclusions:

- first of all, due to the definition of the main components of the health care organization system, relevant scientific publications and archival documents were introduced into a broader historiographical context, which supplement the previous historical knowledge of certain aspects of the outlined issues significantly;
- second of all, the Soviet historiographical myths were deconstructed about the determination of the Communist Party's care and the personal role of the Union of Socialist Soviet Republics leaders and the Ukrainian Soviet Socialist Republic in overcoming the backwardness of the medical sector in the western Ukrainian region of 1939 1941, caused by "a heavy national and social oppression";
- third of all, the dominant influence of the party ideologues of the Stalinist totalitarian regime on the representation of the nature and essence of the radical change in the health care system of the western regions of Ukraine at the first stage of the region's Sovietization (the autumn of 1939 the summer of 1941) was elucidated in detail;
- fourth of all, there was suggested our own interpretation of the medical institutions network growth, their bed stock, medical staff in the process of implementing the Soviet policy of organization of the health care system of the western regions of the Ukrainian Soviet Socialist Republic.

The perspective directions of further research should be considered in the comparative context of subregional (in the context of a particular region) / local (for example, the largest cities in the western region, which were also the administrative centers of the western regions of the Ukrainian Soviet Socialist Republic) analysis of the transformation of medical institutions and their staff.

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